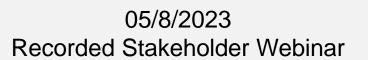
Community Health Worker Policy Initiative: Policy Primer Series

Part four of four engagements to share policy development progress and collaborate with stakeholders through focused feedback





Processing Stakeholder Feedback

General Support for...

Sustainable funding through Medicaid coverage

Covered services reflective of the various supports CHWs provide across settings

Reimbursement model that leverages codes that can be billed in 15 minute units

Reimbursement model that recognizes administrative or ancillary support required outside of direct service delivery

Informed by:

- December 2022 January 2023: Tribal Partner CHW Survey
- January 13, 2023: Public Community Health Worker Webinar
- March 20, 2023: MDHHS SDOH Strategy CHW Subcommittee
- April 17th 2023: Policy Primer Series Recorded Webinar
- General comment submitted to <u>MSAPolicy@michigan.gov</u>



Leveraging Stakeholder Feedback

Covered Services

- Care coordination and system navigation;
- Health promotion and education;
- Other supportive services



Leveraging Stakeholder Feedback

Service Limitations

- Exploring max # of units per month per beneficiary
- Group services limited to 8 beneficiaries at one time
- MHP beneficiaries

Non-Covered Services

- Case management
- Transportation services
- Personal care services/Home Help
- Companion services
- Employment services
- Helping a beneficiary enroll in government or other assistance programs
- Delivery of medication, medical equipment, or medical supply
- Respite care
- Services that require a license
- Duplicate services
- Discharge planning
- Community transition
- Support services covered under behavioral health services programs



Leveraging Stakeholder Feedback

Reimbursement

- Focus on codes that allow for <u>units of service in 15 minute increments.</u>
 - Exploring a single code: T1016
- Group services (max of 8 beneficiaries)
 - HQ modifier
- FQHC, RHC, THC, and Tribal FQHC Impacts:
 - Planning to reimburse CHW services outside of the PPS/AIR at the Medicaid fee screen rates – contingent upon CMS approval of a state plan submission.



We are listening, and we want to hear from you!

To provide feedback, complete the **survey located in the description section of this YouTube video** or directly at the Medicaid training webpage.

